Maamal 98

(Requestor's Name)		
(Add	iress)	
(Add	iress)	
(City	/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bus	iness Entity Nar	ne)
(Doc	ument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to F	iling Officer:	

Office Use Only



100380584091

01/29/22--01018--028 **130.00



T. LEMIEUX FEB 11 2022

COVER LETTER

. .

TO: Registration Section Division of Corporations		
SUBJECT: Emily's House, LLC		
Name of Limited Liability Company		
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.		
Please return all correspondence concerning this matter to the following:		
Matthew R. Harrison		
Name of Person		
Harrison & Gammons, PC		
Firm/Company		
2430 L&N Drive		
Address		
Huntsville, Alabama 35801		
City/State and Zip Code		
matt@harrisongammons.com		
E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
Matthew R. Harrison 256 533-7711		
Name of Contact Person Area Code Daytime Telephone Number		
MAILING ADDRESS:STREET ADDRESS:Division of CorporationsDivision of CorporationsRegistration SectionRegistration SectionP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301		
Enclosed is a check for the following amount: Please make check payable to: FLORIDA DEPARTMENT OF STATE \$\Begin{array}{c} \Delta \text{S125.00 Filing Fee} \end{array} \Delta \text{S130.00 Filing Fee & }\Begin{array}{c} \Delta \text{S155.00 Filing Fee & }\Begin{array}{c} \Delta \text{S160.00 Filing Fee, Certificate} \text{Certificate of Status} \text{Certified Copy} \text{of Status & Certified Copy} of S		

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605,0002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: Emily's House, LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") (if name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L C," or "LI.C.") (Jurisdiction under the law of which foreign limited liability company is organized) (Date first transacted business in Florida, if prior to registration.)
(See sections 605 0904 & 605 0905, F.S. to determine penalty liability.) 5. 1401 Monterrey Drive
(Street Address of Principal Office) 6. 1401 Monterrey Drive Huntsville, AL 35801 Huntsville, AL 35801 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Registered Agents Inc. Name: 7901 4th St N STE 300 Office Address: St. Petersburg Registered agent's acceptance: Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

(Registered agent's signature)

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]: Name and Address: Name and Address: Title or Capacity: Title or Capacity: Name: Emily Hinson Name: John Hinson Manager Manager Manager Address: _____1401 Monterrey Drive Address: 1401 Monterrey Drive ✓ Member Member Huntsville, Alabama 35801 Huntsville, Alabama 35801 Authorized Authorized Person Person Other_____ Other___ Other____ Other_ Manager Manager Name: ______ Name: ______ Manager Member | Address: Member Address: ☐ Authorized Authorized Person Person Other____ Other_____ Other____ Other Name: _____ Manager Name: _____ Manager Member Address: ____ Member | Address: _____ Authorized Authorized Person Person Other____ Other____ Other___ Other Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Nonindexed individuals may be added to the index when filing your Florida Department of State Annual Report form. 9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted) 10. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. **Emily Hinson**

Typed or printed name of signee

John H. Merrill Secretary of State P.O. Box 5616 Montgomery, AL 36103-5616

STATE OF ALABAMA

I, John H. Merrill, Secretary of State of Alabama, having custody of the Great and Principal Seal of said State, do hereby certify that

the entity records on file in this office disclose that Emily's House, LLC was formed in Madison County, Alabama on November 18, 2016. The Alabama Entity Identification number for this entity is 376-932. I further certify that the records do not disclose that said entity has been dissolved, cancelled or terminated.



20220107000007940

In Testimony Whereof, I have hereunto set my hand and affixed the Great Seal of the State, at the Capitol, in the city of Montgomery, on this day.

01/07/2022

Date

X. W. Merill

John H. Merrill

Secretary of State